

POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number		10/562,856-Conf. #6426
	Filing Date		May 19, 2008
	First Named Inventor		Rolf Cremerius
	Title	LASER WELDING OF HARDENABLE STEEL	
	Art Unit		3742
	Examiner Name		Not Yet Assigned
Attorney Docket No.		66969-0006	

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.
OR

☒ I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

84362

OR

☐ I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

Practitioner(s) Name	Registration Number	Practitioner(s) Name	Registration Number

Please recognize or change the correspondence address for the above-identified application to:

☒ The address associated with the above-mentioned Customer Number:
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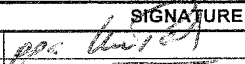
☐ The address associated with Customer Number:

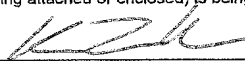
<input type="checkbox"/> Firm or Individual Name	Kristin L. Murphy RADER, FISHMAN & GRAUER PLLC				
Address	39533 Woodward Avenue Suite 140				
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I am the:

☐ Applicant/Inventor.
OR

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on _____

SIGNATURE of Applicant or Assignee of Record			
Signature		Date	4-30-09
Name	Uwe Paksa Malcolm Harris	Telephone	
Title and Company	Authorized Signer, GKN Driveline International GmbH		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.			
<input type="checkbox"/> *Total of <u>1</u> forms are submitted.			

POA or Authorization of Agent	
I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).	
Dated: <u>5-29-09</u>	Signature:  (Kristin L. Murphy)